

<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL</p> <p>Address to: Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450</p> </div> <div style="width: 45%; text-align: center;"> <p>NOV 19 2007</p> <p>OTPE</p> <p>NOV 19 2007</p> </div> </div>		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Application Number: 10/619,612</td> <td style="width: 50%;">Confirmation Number: 6532</td> </tr> <tr> <td colspan="2">Filing Date: July 16, 2003</td> </tr> <tr> <td colspan="2">First Named Inventor: Vincent DE LAFORCADE</td> </tr> <tr> <td colspan="2">Group Art Unit: 3732</td> </tr> <tr> <td colspan="2">Examiner: Robyn A. Doan</td> </tr> <tr> <td colspan="2">Attorney Docket Number: 05725.1226-00000</td> </tr> </table>		Application Number: 10/619,612	Confirmation Number: 6532	Filing Date: July 16, 2003		First Named Inventor: Vincent DE LAFORCADE		Group Art Unit: 3732		Examiner: Robyn A. Doan		Attorney Docket Number: 05725.1226-00000	
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<p>This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application.</p> <p>Request for Continued Examination (RCE) practice under 37 C.F.R. § 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application.</p>															
<p>1. Submission required under 37 C.F.R. § 1.114:</p> <p>a. <input type="checkbox"/> Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked.</p> <p style="margin-left: 20px;">i. <input type="checkbox"/> Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____.</p> <p style="margin-left: 20px;">ii. <input type="checkbox"/> Other _____</p> <p>b. <input type="checkbox"/> DO NOT ENTER the amendment(s) previously filed on _____. An alternate submission is attached.</p> <p>c. <input checked="" type="checkbox"/> Enclosed submission: .</p> <div style="display: flex; justify-content: space-between; margin-left: 20px;"> <div style="width: 45%;"> <p>i. <input checked="" type="checkbox"/> Reply to Office Action</p> <p>ii. <input type="checkbox"/> Affidavit(s)/Declaration(s)</p> </div> <div style="width: 45%;"> <p>iii. <input checked="" type="checkbox"/> Information Disclosure Statement</p> <p>iv. <input type="checkbox"/> Other _____</p> </div> </div>															
<p>2. Miscellaneous</p> <p>a. <input type="checkbox"/> Suspension of action on the above-mentioned application is requested under 37 C.F.R. § 1.103(c) for a period of _____ months. (Period of suspension shall not exceed 3 months; fee under 37 C.F.R. § 1.17(i) required.)</p> <p>b. <input type="checkbox"/> Other _____</p>															
<p>3. Fees</p> <p>a. <input checked="" type="checkbox"/> The filing fee is calculated as follows:</p> <div style="margin-left: 20px;"> <p>i. <input checked="" type="checkbox"/> \$810.00 RCE fee required under 37 C.F.R. § 1.17(e)</p> <p>ii. <input checked="" type="checkbox"/> Petition for extension of time for (3 Months) <u>\$1,050.00</u></p> <p>iii. <input type="checkbox"/> Other _____</p> </div> <p>b. <input checked="" type="checkbox"/> Check in the amount of <u>\$1,860.00</u> enclosed.</p> <p>c. <input checked="" type="checkbox"/> The Commissioner is authorized to charge any deficiencies in the filing fees, or credit any overpayments to Deposit Account 06-0916.</p>															
<p>Signature of Applicant, Attorney, or Agent Required</p>															
Name: K. Kevin Mun		(571) 203-2739	Reg. No.: 50,585												
Signature:		Date: November 19, 2007													
<p>Certificate of Mailing or Transmission</p>															
<p>I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to Commissioner for Patents, MAIL STOP RCE, P.O. Box 1450, Alexandria, VA. 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office on:</p>															
Name: _____															
Signature: _____		Date: _____													

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